

EXHIBIT 3

TEXAS SECRETARY of STATE
RUTH R. HUGHS

BUSINESS ORGANIZATIONS INQUIRY - VIEW ENTITY

Filing Number: 803511650 **Entity Type:** Foreign Limited Liability Company (LLC)
Original Date of Filing: January 7, 2020 **Entity Status:** In existence
Formation Date: N/A
Tax ID: 32073004080 **FEIN:** 822355783

Name: WSOU Investments, LLC
Address: 605 Austin Ave. #6
Waco, TX 76701 USA

Fictitious Name: N/A
Jurisdiction: DE, USA
Foreign Formation Date: July 21, 2017

REGISTERED AGENT	FILING HISTORY	NAMES	MANAGEMENT	ASSUMED NAMES	ASSOCIATED ENTITIES
View Image	Document Number	Filing Type	Filing Date	Effective Date	Eff. Cond Page Count
	935572900002	Application for Registration	January 7, 2020	January 7, 2020	No 4
	935572900003	Certificate of Assumed Business Name	January 7, 2020	January 7, 2020	No 2
	938854460002	Certificate of Assumed Business Name	January 21, 2020	January 21, 2020	No 2

[Order](#)

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Instructions:

>To place an order for additional information about a filing press the 'Order' button.

Form 503
(Revised 08/19)

Return in duplicate to:
Secretary of State
P.O. Box 13697
Austin, TX 78711-3697
512 463-5555
FAX: 512 463-5709
Filing Fee: \$25



Assumed Name Certificate

This space reserved for office use.

FILED
In the Office of the
Secretary of State of Texas

JAN 21 2020

Corporations Section

Assumed Name

1. The assumed name under which the business or professional service is, or is to be, conducted or rendered is: Brazos Development and Licensing

Entity Information

2. The legal name of the entity filing the assumed name is:

WSOU INVESTMENTS, LLC

State the name of the entity as currently shown in the records of the secretary of state or on its organizational documents, if not filed with the secretary of state.

3. The entity filing the assumed name is a: (Select the appropriate entity type below.)

<input type="checkbox"/> For-profit Corporation	<input checked="" type="checkbox"/> Limited Liability Company
<input type="checkbox"/> Nonprofit Corporation	<input type="checkbox"/> Limited Partnership
<input type="checkbox"/> Professional Corporation	<input type="checkbox"/> Limited Liability Partnership
<input type="checkbox"/> Professional Association	<input type="checkbox"/> Cooperative Association
<input type="checkbox"/> Other	<i>Specify type of entity. For example, foreign real estate investment trust, state bank, insurance company, etc.</i>

4. The file number, if any, issued to the entity by the secretary of state is: 0803511650

5. The state, country, or other jurisdiction of formation of the entity is: Delaware

6. The entity's principal office address is:

211 E. 7TH STREET, SUITE 620

Street or Mailing Address

AUSTIN	TX	USA	78701
<i>City</i>	<i>State</i>	<i>Country</i>	<i>Postal or Zip Code</i>

Period of Duration

7a. The period during which the assumed name will be used is 10 years from the date of filing with the secretary of state.

OR

7b. The period during which the assumed name will be used is _____ years from the date of filing with the secretary of state (not to exceed 10 years).

OR

7c. The assumed name will be used until _____ (not to exceed 10 years).
mm/dd/yyyy

RECEIVED

County or Counties in which Assumed Name Used

8. The county or counties where business or professional services are being or are to be conducted or rendered under the assumed name are:

All counties

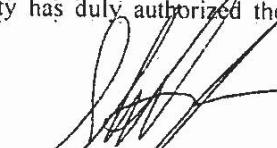
All counties with the exception of the following counties: _____

Only the following counties: _____

Execution

The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument and also certifies that the person is authorized to sign on behalf of the identified entity. If the undersigned is acting in the capacity of an attorney in fact for the entity, the undersigned certifies that the entity has duly authorized the undersigned in writing to execute this document.

Date: 1-17-20


Stuart Shanus, President

Signature of a person authorized by law to sign on behalf of the identified entity (see instructions)

Form 503
(Revised 08/19)

Return in duplicate to:
Secretary of State
P.O. Box 13697
Austin, TX 78711-3697
512 463-5555
FAX: 512 463-5709
Filing Fee: \$25



Assumed Name Certificate

This space reserved for office use.

FILED
In the Office of the
Secretary of State of Texas

JAN 07 2020

Corporations Section

Assumed Name

1. The assumed name under which the business or professional service is, or is to be, conducted or rendered is: WSOU Investments

Entity Information

2. The legal name of the entity filing the assumed name is:

WSOU Investments, LLC

State the name of the entity as currently shown in the records of the secretary of state or on its organizational documents, if not filed with the secretary of state.

3. The entity filing the assumed name is a: (Select the appropriate entity type below.)

<input type="checkbox"/> For-profit Corporation	<input checked="" type="checkbox"/> Limited Liability Company
<input type="checkbox"/> Nonprofit Corporation	<input type="checkbox"/> Limited Partnership
<input type="checkbox"/> Professional Corporation	<input type="checkbox"/> Limited Liability Partnership
<input type="checkbox"/> Professional Association	<input type="checkbox"/> Cooperative Association
<input type="checkbox"/> Other	<i>Specify type of entity. For example, foreign real estate investment trust, state bank, insurance company, etc.</i>

4. The file number, if any, issued to the entity by the secretary of state is: _____

5. The state, country, or other jurisdiction of formation of the entity is: Delaware

6. The entity's principal office address is:

605 Austin Avenue, #6

Street or Mailing Address

<u>Waco</u>	<u>TX</u>	<u>USA</u>	<u>76701</u>
<i>City</i>	<i>State</i>	<i>Country</i>	<i>Postal or Zip Code</i>

Period of Duration

7a. The period during which the assumed name will be used is 10 years from the date of filing with the secretary of state.

OR

7b. The period during which the assumed name will be used is _____ years from the date of filing with the secretary of state (not to exceed 10 years).

OR

7c. The assumed name will be used until _____ (not to exceed 10 years).
mm/dd/yyyy

County or Counties in which Assumed Name Used

8. The county or counties where business or professional services are being or are to be conducted or rendered under the assumed name are:

All counties

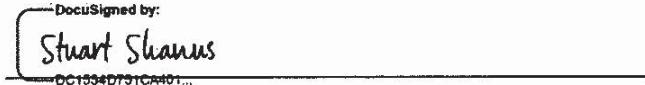
All counties with the exception of the following counties: _____

Only the following counties: _____

Execution

The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument and also certifies that the person is authorized to sign on behalf of the identified entity. If the undersigned is acting in the capacity of an attorney in fact for the entity, the undersigned certifies that the entity has duly authorized the undersigned in writing to execute this document.

Date: 01/06/2020

 DocuSigned by:
Stuart Shamus
DC1554D791CA401...

Signature of a person authorized by law to sign on behalf of the identified entity (see instructions)

Form 304
(Revised 05/11)

Submit in duplicate to:
Secretary of State
P.O. Box 13697
Austin, TX 78711-3697
512 463-5555
FAX: 512/463-5709
Filing Fee: \$750



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F I L E D
In the Office of the
Secretary of State of Texas

JAN 07 2020

Corporations Section

**Application for
Registration
of a Foreign Limited
Liability Company**

1. The entity is a foreign limited liability company. The name of the entity is:

WSOU Investments, LLC

Provide the full legal name of the entity as stated in the entity's formation document in its jurisdiction of formation.

2A. The name of the entity in its jurisdiction of formation does not contain the word "limited liability company" or "limited company" (or an abbreviation thereof). The name of the entity with the word or abbreviation that it elects to add for use in Texas is:

2B. The entity name is not available in Texas. The assumed name under which the entity will qualify and transact business in Texas is:

The assumed name must include an acceptable organizational identifier or an accepted abbreviation of one of these terms.

3. Its federal employer identification number is: 82-2355783

Federal employer identification number information is not available at this time.

4. It is organized under the laws of: (set forth state or foreign country) Delaware

and the date of its formation in that jurisdiction is: 07/21/2017

mm/dd/yyyy

5. As of the date of filing, the undersigned certifies that the foreign limited liability company currently exists as a valid limited liability company under the laws of the jurisdiction of its formation.

6. The purpose or purposes of the limited liability company that it proposes to pursue in the transaction of business in Texas are set forth below.

Licensing

The entity also certifies that it is authorized to pursue such stated purpose or purposes in the state or country under which it is organized.

7. The date on which the foreign entity intends to transact business in Texas, or the date on which the foreign entity first transacted business in Texas is: 01/06/2020

mm/dd/yyyy Late fees may apply (see instructions).

8. The principal office address of the limited liability company is:

605 Austin Avenue, #6	Waco	TX	USA	76701
<i>Address</i>	<i>City</i>	<i>State</i>	<i>Country</i>	<i>Zip/Postal Code</i>

Complete item 9A or 9B, but not both. Complete item 9C.

9A. The registered agent is an organization (cannot be entity named above) by the name of:

Corporation Service Company d/b/a CSC-Lawyers Incorporating Service Company

OR

9B. The registered agent is an individual resident of the state whose name is:

First Name	M.I.	Last Name	Suffix
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9C. The business address of the registered agent and the registered office address is:

211 E. 7th Street Ste 620, Austin, TX 78701-3218

Street Address	City	State	Zip Code
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10. The entity hereby appoints the Secretary of State of Texas as its agent for service of process under the circumstances set forth in section 5.251 of the Texas Business Organizations Code.

11. The name and address of each governing person is:

NAME AND ADDRESS OF GOVERNING PERSON (Enter the name of either an individual or an organization, but not both.)			
IF INDIVIDUAL			
Stuart	Shanus		
<i>First Name</i>	<i>M.I.</i>	<i>Last Name</i>	<i>Suffix</i>
OR			
IF ORGANIZATION			
<i>Organization Name</i>			
605 Austin Ave #6	Waco	TX	USA 76701
<i>Street or Mailing Address</i>	<i>City</i>	<i>State</i>	<i>Country Zip Code</i>

NAME AND ADDRESS OF GOVERNING PERSON (Enter the name of either an individual or an organization, but not both.)			
IF INDIVIDUAL			
<i>First Name</i>	<i>M.I.</i>	<i>Last Name</i>	<i>Suffix</i>
OR			
IF ORGANIZATION			
<i>Organization Name</i>			
<i>Street or Mailing Address</i>	<i>City</i>	<i>State</i>	<i>Country Zip Code</i>

NAME AND ADDRESS OF GOVERNING PERSON (Enter the name of either an individual or an organization, but not both.)			
IF INDIVIDUAL			
<i>First Name</i>	<i>M.I.</i>	<i>Last Name</i>	<i>Suffix</i>
OR			
IF ORGANIZATION			
<i>Organization Name</i>			
<i>Street or Mailing Address</i>	<i>City</i>	<i>State</i>	<i>Country Zip Code</i>

Supplemental Provisions/Information

Text Area: [The attached addendum, if any, is incorporated herein by reference.]

Effectiveness of Filing (Select either A, B, or C.)

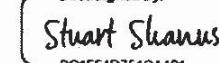
- A. This document becomes effective when the document is filed by the secretary of state.
- B. This document becomes effective at a later date, which is not more than ninety (90) days from the date of signing. The delayed effective date is: _____
- C. This document takes effect upon the occurrence of a future event or fact, other than the passage of time. The 90th day after the date of signing is: _____

The following event or fact will cause the document to take effect in the manner described below:

Execution

The undersigned affirms that the person designated as registered agent has consented to the appointment. The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument and certifies under penalty of perjury that the undersigned is authorized under the provisions of law governing the entity to execute the filing instrument.

Date: 01/06/2019

DocuSigned by:

DC1554D751CA401
Signature of authorized person (see instructions)

Stuart Shanus

Printed or typed name of authorized person.

Form 401-A
(Revised 12/09)



**Acceptance of Appointment
and
Consent to Serve as Registered Agent
§5.201(b) Business Organizations Code**

The following form may be used when the person designated as registered agent in a registered agent filing is an individual.

<u>Acceptance of Appointment and Consent to Serve as Registered Agent</u>		
I acknowledge, accept and consent to my designation or appointment as registered agent in Texas for		
<p><i>Name of represented entity</i> I am a resident of the state and understand that it will be my responsibility to receive any process, notice, or demand that is served on me as the registered agent of the represented entity; to forward such to the represented entity; and to immediately notify the represented entity and submit a statement of resignation to the Secretary of State if I resign.</p>		
X:	<i>Signature of registered agent</i>	<i>Printed name of registered agent</i>
		<i>Date (mm/dd/yyyy)</i>

The following form may be used when the person designated as registered agent in a registered agent filing is an organization.

<u>Acceptance of Appointment and Consent to Serve as Registered Agent</u>		
I am authorized to act on behalf of <u>Corporation Service Company d/b/a CSC-Lawyers Incorporating Service Company</u> <i>Name of organization designated as registered agent</i>		
The organization is registered or otherwise authorized to do business in Texas. The organization acknowledges, accepts and consents to its appointment or designation as registered agent in Texas for: WSOU INVESTMENTS, LLC		
<p><i>Name of represented entity</i> The organization takes responsibility to receive any process, notice, or demand that is served on the organization as the registered agent of the represented entity; to forward such to the represented entity; and to immediately notify the represented entity and submit a statement of resignation to the Secretary of State if the organization resigns.</p>		
X: By:	Brian Courtney, Asst. Vice President	01/07/2020
<i>Signature of person authorized to act on behalf of organization</i>	<i>Printed name of authorized person</i>	<i>Date (mm/dd/yyyy)</i>
Corporation Service Company d/b/a CSC-Lawyers Incorporating Service Company		